Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                                   |   |                      |                  |        | SMALL ENTITY TYPE   |                        |          | OTHER THAN<br>OR SMALL ENTITY |                        |  |
|---|--|---|-----------------------------------|---|----------------------|------------------|--------|---------------------|------------------------|----------|-------------------------------|------------------------|--|
| TOTAL CLAIMS  |  |   | 7.8                               |   |                      |                  | ſ      | RATE                | FEE                    |          | RATE                          | FEE                    |  |
| FOR   |  |   | NUMBER FILED                      |   | NUMBER EXTRA         |                  | İ      | BASIC FEE           | 375.00                 | OR       | BASIC FEE                     | 750.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | 7  minus 20=                      |   | * &                  |                  |        | X\$ 9=              |                        | OR       | X\$18=                        | 144                    |  |
| INDEPENDENT CLAIMS  |  |   | , mi                              | nus 3 =                                 | * 4                  | * 4              |        | X42=                |                        | OR       | X84=                          | 374                    |  |
| MULTIPLE DEPENDENT CLAIM P  |  |   | RESENT                            |   |                      |                  |        | +140=               |                        |          | +280=                         |                        |  |
| * If  | the difference                                 | in column 1 is                            | less than zero, enter "0" in colu |   |                      | column 2         | i      | TOTAL               |                        | OR<br>OR | TOTAL                         | フッ                     |  |
|   | C  | A PA PMIA I                               | MENDED - PART II                  |   |                      |                  |        | IOIAL               |                        | UH       |                               | <del></del>            |  |
|   | <u> </u>                                       | (Column 1)                                | MALIADEL                          | (Colur                                  | nn 2)                | (Column 3)       |        | SMALL ENTITY        |                        | OR       | OTHER THAN SMALL ENTITY       |                        |  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                   | HIGH<br>NUM<br>PREVIO<br>PAID           | BER<br>DUSLY         | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |          | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus                             | **                                      |                      | =                |        | X\$ 9=              |                        | OR       | X\$18=                        |                        |  |
|   | Independent                                    | *   | Minus                             | ***                                     | ==                   | =                |        | X42=                |                        | OR       | X84=                          |                        |  |
|   |  | NTATION OF MI                             |                                   |   |                      |                  | 1      | +140=               |                        | OR       | +280=                         |                        |  |
|   | , 1  |   |                                   |   |                      |                  |        | TOTAL               |                        | OR       | TOTAL<br>ADDIT, FEE           |                        |  |
|   |  | )   | ADDIT. FEE                        |   | •                    | ADDII. FEET      |        |                     |                        |          |                               |                        |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                   | (Colur<br>HIGH<br>NUM<br>PREVIO<br>PAID | IEST<br>BER<br>OUSLY | PRESENT<br>EXTRA |        | . RATE              | ADDI-<br>TIONAL<br>FEE |          | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus                             | **                                      |                      | =                |        | X\$ 9=              |                        | OR       | X\$18=                        |                        |  |
|   | Independent                                    | *   | Minus                             | ***                                     | 5 01 4114            | =                | 11     | X42≃                |                        | OR       | X84=                          |                        |  |
| <u></u>   | FIRST PRESE                                    | NTATION OF M                              | JLTIPLE DEI                       | PENDENT                                 | CLAIM                |                  | 1      | +140=               |                        | OR       | +280=                         |                        |  |
|   |  |   |                                   |   |                      |                  |        | TOTAL<br>ADDIT: FEE |                        | OR       | TOTAL<br>ADDIT. FEE           |                        |  |
| <del></del>   |  | (Column 1)                                |                                   | (Colur                                  |                      | (Column 3)       |        |                     |                        | •        | ADDIT: 1 CE                   |                        |  |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                   | HIGH<br>NUM<br>PREVIO<br>PAID           | BER<br>DUSLY         | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |          | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus                             | **                                      |                      | =                | ] [    | X\$ 9≈              |                        | OR       | X\$18=                        |                        |  |
|   | Independent                                    | *   | Minus                             | ***                                     | <del> </del>         | ]=               | ] [    | X42=                |                        | OR       | X84=                          |                        |  |
| <u> </u>  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                   |   |                      |                  |        | +140=               |                        | OR       | +280=                         |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |                                   |   |                      |                  |        |                     |                        | İ        | TOTAL                         |                        |  |
| 100   | If the "Highest Nu                             | mber Previously P                         | aid For" IN TH                    | IS SPACE                                | is less tha          | an 3, enter "3." |        | ADDIT. FEE          |                        | OR       | ADDIT. FEE                    | L                      |  |
|   |  | ber Previously Pa                         |                                   |   |                      |                  | er fou | ind in the app      | propriate bo           | k in co  | lumn 1.                       |                        |  |